Image# 12970426941 PAGE 1 / 6

FEC FORM 1			TATEN RGAN								Of	fice Us	se Onl	у			
1. NAME OF COMMITTEE (in	n full)	,	Check if named changed)	ne		le:If typi e lines.	ng, type		12F	E4M	5	_					
UNITE HE	RE TII	² Can	npaigr	ı Co	mmi	ttee			1 1	1 1							
ADDRESS (number a	nd street)	275 7th A	venue 11th	Floor													
(Check if ac	ddress																
is changed)		New Yor	k 						NY		100	01]-[
				С	ITY				STATE	į			ZIP (CODE	≣		
COMMITTEE'S E-MA	address		provide only unitehere.or		nail addre	ess)				1 1							
is change	d)																
COMMITTEE'S WEB	PAGE ADD	RESS (UR	tL)														
(Check if																	
is change	d)																
2. DATE 02	M / D 1) / Y	2012														
3. FEC IDENTIFIC	CATION NU	MBER	C	C00	0004861												
4. IS THIS STATEM	MENT	NEW	(N) C	DR	×	AMEN	IDED (A	۸)									
l certify that I have ε	examined thi	s Statemer	nt and to the	e best c	of my kno	owledge	and beli	ief it is	true,	corre	ct and	com	plete.				
Type or Print Name	of Treasurer	Thomas	Snyder														
Signature of Treasure	Thomas	Snyder			[1	Electronic	ally Filed	d) _C	ate	O2	M /	1	7	/ Y	20	12	
NOTE: Submission of			mplete inform			-		•				penal	ties of	f 2 U	.S.C.	§437(].
Office					Fo	or further	information	on con	tact:			CE/	- E	— ОР!			_

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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		**** 1 (Paying 02/2000)	Dogg 2
		rm 1 (Revised 02/2009)	Page 2
		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	1
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nnected organization is a
		Corporation Wo Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revise		Page 3
Write or Type Committee N		
UNITE HERE	TIP Campaign Committee	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative	, or Leadership PAC Sponsor
UNITE HERE		
Mailing Address	275 Seventh Avenue	
ag / taa. eee	11th Floor	
	New York NY	10001
	CITY STATE	ZIP CODE
	SIAIL	ZII GODE
Relationship: X Conne	ected Organization Affiliated Committee Joint Fundraising Represent	ative Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the p	person in possession of committee
Zaina ⁻	Tannu-Khan	
Full Name	275 Causath Augus	
Mailing Address	275 Seventh Avenue	
	11th Floor	
	New York NY	10001
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	212 265 7000
8. Treasurer : List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee g., assistant treasurer).	; and the name and address of
Full Name Thoma of Treasurer	s Snyder	
Mailing Address	275 Seventh Avenue	
	11th Floor	<u> </u>
	New York NY	10001
	CITY STATE	ZIP CODE
Title or Position Treasurer		212 265 7000
_	Telephone number	

FEC Form 1	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Elizabeth Ann Kennington	
Mailing Address	1415 Pennsylvania Avenue	
	Durham NC 27705 CITY STATE Z	IP CODE
Title or Position Assistant Treasure	er 919 – 28	36 - 9519 - 100
	epositories: List all banks or other depositories in which the committee deposits funds, holds	accounts, rents
Name of Bank, Dep		
Name of Bank, Dep		
Name of Bank, Dep	pository, etc. Amalgamated Bank	
Name of Bank, Dep	pository, etc. Amalgamated Bank	
Name of Bank, Dep	Amalgamated Bank 275 Seventh Avenue New York New York New York New York	IP CODE
Name of Bank, Dep	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Z	IP CODE
Name of Bank, Dep Mailing Address Name of Bank, Dep	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Z Pository, etc.	IIP CODE
Name of Bank, Dep Mailing Address Name of Bank, Dep	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Z pository, etc.	IP CODE
Name of Bank, Dep Mailing Address Name of Bank, Dep	Amalgamated Bank 275 Seventh Avenue New York CITY STATE Z Pository, etc.	IP CODE

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: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is filed to remove the Amalgamated Bank PAC as an affilliated committee.

Form/Schedule: Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı Vanguard Bank İny Group Mailing Address 19101 Philadelphia CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number